

ORDER FOR SUPPLIES OR SERVICES

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| | | | | | | | | | | | |
|---|--|--|--|--|--|--|--|---------------------------------|--|---------------------|--|
| 1. CONTRACT/PURCH ORDER/ AGREEMENT NO. DAKF11-99-D-0007 | | 2. DELIVERY ORDER/ CALL NO. 0005 | | 3. DATE OF ORDER/CALL 1999Sep17 | | 4. REQ./PURCH REQUEST NO. W33FYJ9257NJ33 | | 5. PRIORITY | | | |
| 6. ISSUED BY ARMY ATLANTA CONTRACTING CENTER 1301 ANDERSON WAY SW AFLG-PR FORT MCPHERSON GA 30330-1096 | | | | 7. ADMINISTERED BY SEE ITEM 6 | | 8. DELIVERY FOB <input checked="" type="checkbox"/> DEST <input type="checkbox"/> OTHER (See Schedule if other) | | | | | |
| 9. CONTRACTOR INTERNATIONAL CONSULTANTS INC IHE BEEDIWALA 4134 LINDEN AVENUE SUITE 200 DAYTON OH 45432 | | 10. DELIVER TO FOB POINT BY (Date) SEE SCHEDULE | | 11. MARK IF BUSINESS IS <input type="checkbox"/> SMALL <input checked="" type="checkbox"/> SMALL DISADVANTAGED WOMEN-OWNED | | 12. DISCOUNT TERMS | | | | | |
| 13. MAIL INVOICES TO THE ADDRESS IN BLOCK See Item 15 | | | | | | | | | | | |
| 14. SHIP TO SEE SCHEDULE | | 15. PAYMENT WILL BE MADE BY DEFENSE FINANCE AND ACCOUNTING SERVICE ORLANDO PO BOX 934400 2500 LEAHY ORLANDO FL 32893-4400 | | | | 16. MARK ALL PACKAGES AND PAPERS WITH IDENTIFICATION NUMBERS IN BLOCKS 1 AND 2. | | | | | |
| 16. TYPE OF ORDER DELIVERY/CALL <input checked="" type="checkbox"/> PURCHASE <input type="checkbox"/> | | This delivery order/call is issued on another Govt. agency or in accordance with and subject to terms and conditions of above numbered contract. Reference your quote dated _____ Furnish the following on terms specified herein. ACCEPTANCE. THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME. | | | | | | | | | |
| NAME OF CONTRACTOR | | SIGNATURE | | TYPED NAME AND TITLE | | DATE SIGNED (YYYYMMDD) | | | | | |
| <input type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies: | | | | | | | | | | | |
| 17. ACCOUNTING AND APPROPRIATION DATA/ LOCAL USE See Schedule | | | | | | | | | | | |
| 18. ITEM NO. | | 19. SCHEDULE OF SUPPLIES/ SERVICES | | 20. QUANTITY ORDERED/ ACCEPTED* | | 21. UNIT | | 22. UNIT PRICE | | 23. AMOUNT | |
| | | SEE SCHEDULE | | | | | | | | | |
| * If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle | | | | 24. UNITED STATES OF AMERICA <i>Katherine E. Williams</i> BY: Katherine E. Williams CONTRACTING / ORDERING OFFICER | | | | 25. TOTAL \$90,400.74 | | | |
| 26. QUANTITY IN COLUMN 20 HAS BEEN <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO THE CONTRACT EXCEPT AS NOTED DATE _____ SIGNATURE OF AUTHORIZED GOVT. REP. _____ | | | | 27. SHIP NO. <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL | | 28. DO VOUCHER NO. | | 29. DIFFERENCES | | 30. INITIALS | |
| 36. I certify this account is correct and proper for payment. DATE _____ SIGNATURE AND TITLE OF CERTIFYING OFFICER _____ | | | | 31. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL | | 32. PAID BY | | 33. AMOUNT VERIFIED CORRECT FOR | | 34. CHECK NUMBER | |
| 37. RECEIVED AT | | | | 38. RECEIVED BY | | 39. DATE RECEIVED (YYYYMMDD) | | 40. TOTAL CONTAINERS | | 41. S/R ACCOUNT NO. | |
| | | | | | | | | 42. S/R VOUCHER NO. | | | |

CONTINUATION SHEETREFERENCE NO. OF DOCUMENT BEING CONTINUED
DAKF11-99-D-0007-0005PAGE
2 OF 17NAME OF OFFEROR OR CONTRACTOR
INTERNATIONAL CONSULTANTS INC

SECTION B Supplies or Services and Prices

| ITEM NO | SUPPLIES/SERVICES | MAX QUANTITY | UNIT | UNIT PRICE | MAX AMOUNT |
|---------|--|-----------------|------|------------|------------|
| 0002 | Logistical Services (FFP or T&M) - Services Base Year: 1 Sep 99 - 31 Aug 00. Performance in accordance with the schedule in the task order PWS. | | Lot | \$ | \$ |

MAX
NET AMT
GUARANTEED
MIN AMOUNT

| ITEM NO | SUPPLIES/SERVICES | MAX QUANTITY | UNIT | UNIT PRICE | MAX AMOUNT |
|---------|--|-----------------|------|-------------|-------------|
| 0002AA | Logistical services (FFP) FFP - Logistical Services shall be performed in accordance with the task order PWS to include direct labor hours, direct materials, and other direct costs. Price includes profit. PURCHASE REQUEST NUMBER W33FYJ9257NJ33 | 1.00 | Lot | \$14,527.21 | \$14,527.21 |

MAX
NET AMT
GUARANTEED
MIN AMOUNT

ACRN AA Funded Amount \$14,527.21